

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Aug</i>		8/9/00
O.I.P.E. CLASSIFIER		10	8-15-00
FORMALITY REVIEW	<i>AP</i>	901	9/20/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

UNAVAILABLE COPY

Claim	Final	Original	Date
1	✓	✓	7-5-2004
2	✓	✓	7-19-2004
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
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If more than 150 claims or 10 actions  
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